The Value of Membership with the American College of Cardiology

The value of membership in the ACC can be found in the recognition it provides you among professional peers and patients as a cardiovascular professional dedicated to the highest quality of care. Your membership provides you with access to the most up-to-date clinical information, and opportunities for networking, leadership, involvement, and “giving back” to the discipline.

While many organizations attract individuals through their purpose and principles, ACC’s members, and the patients they care for, are the motivation and the drivers for all that the College achieves. The founders and leaders of the ACC created a mission statement and a set of core values that serve as the foundation and guiding principles for the work of the College. By personal choice, training and daily pursuit, ACC members make these precepts relevant and hold the College accountable.
Take Action to Protect Patient Access

The ACC has launched the next phase of its campaign to protect patient access to quality CCV care by fighting the final 2010 Medicare Physician Fee Schedule. The new web site, www.campaignforpatientaccess.org features more information about the rule and way to get involved. Also, don’t miss “Take Action for Access” week, Dec. 7-11, which will feature visits to Congress on Capitol Hill and letters and calls from ACC members at home. Visit the website for more ways you can get involved. The odds against completely stopping the cuts are high, but the College needs ACC members in the effort to fight the cuts more than ever. Visit www.campaignforpatientaccess.org.

D2B Strategies Reduce MI Deaths

Seventy-five percent of participating hospitals in ACC’s Door-toBalloon (D2B) Alliance were able to treat ST-segment elevation myocardial infarction patients within 90 minutes by 2008, the Alliance’s goal, according to a new study from the Journal of the American College of Cardiology (JACC) showing that the way care for heart attack patient is delivered can make a life or death difference. For more on the study, view the December 15-22nd issue of JACC.

Readmissions Initiative Enrollment Growing

There are nearly 500 unique facilities and almost 700 participants already enrolled in ACC’s newest quality initiative, Hospital to Home (H2H).

H2H is an effort to improve the transition from inpatient to outpatient status for individuals hospitalized with cardiovascular disease. The initiative has released two new document to facilitate improvement, including a H2H Action Planning Form around the Three Question Framework and an H2H Readmissions Form. Both are accessible exclusively to enrolled participants. To enroll, please visit: H2HQuality.org.

Effective Legislative Training - It’s all about relationships!

Before you contact your Legislator you need to think about what you are trying to accomplish and then take action to accomplish your goal.

• To develop a relationship with Legislator
  a. Check out their website for some quick research.
  b. Invite your Legislator to your office during the Legislative recess.
  c. Use patient examples to highlight your points.
  d. Attend local events.
• To develop a relationship with Legislative office
  a. Take the district director out to lunch.
• To influence Legislator on particular issues
  a. Write letters on specific issues to ask for a vote, thank them for a vote or to congratulate them on passing a bill.
  b. Call your Legislator regarding your position on a bill or issue. Be brief and ask if he/she has a position or views on the issue and be sure to thank them for their time.
  c. For critical issues work toward a face to face meeting.
Patients Have Questions?  
CardioSmart Has Answers!

CardioSmart is the ACC’s online resource for patients designed to help them work with their physicians to understand and manage their CV health. Send your patients to www.cardiosmart.org for the latest cardiovascular news, as well as tools and strategies for prevention, control, and management of their health!

Looking For Technology Tips?

The ACC has another on-line resource just for you, our members! Access the Electronic Health Records (HER) Toolkit at www.acc.org/practicemgt/healthcaretechnology You can view Informatics reports, Health Information Technology (HIT) Data, Federal mandates, and e-Prescribing, amongst others.

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It’s the nation’s first-ever registry-based cardiovascular network linking thousands of cardiology practices to each other and to the ACC’s National Cardiovascular Data Registry (NCDR).

• Practice management tools
• Workflow and work force solutions
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• Advocacy opportunities
• Quality improvement initiatives, strategies and communities
• Health IT tools
• Risk management strategies for lowering medical liability costs
• The PINNACLE™ Registry - formerly the IC3 Program

It’s all at PINNACLEnetwork.org.

Upcoming Events

March 14 - 16th  
ACC.10 i2 Summit 2010  
Atlanta, GA

March 14th  
6:00 pm - 7:30 pm  
5th Annual All Chapter Reception  
The Omni Hotel, Atlanta, GA

March 30th, 2010  
12:30 pm - 1:30 PM  
Targeting Stroke: A Decade of Progress, A Decade of Possibility  
Webinar

May 13th  
6:30 pm - 8:00 pm  
CME Course for Physicians ONLY!  
“New Anti-Thrombotic Strategies in the Management of Atrial Fibrillation”  
Morton’s Steak House  
1511 6th Avenue Seattle, WA 98101  
Speaker: Richard V. Milani, MD
Unlicensed discount health cards can be hazardous to your wallet. Over the past few years, the California Department of Managed Health Care has been investigating discount health cards to determine if they offer any benefit for California consumers. The availability of these cards has been spreading rapidly in California and throughout the country, due in part to the high price and limited access to private health insurance coverage. But the faxes, spam e-mails, TV commercials and aggressive telemarketing claiming low monthly charges are usually selling little more than a card, not an actual discount on health care services.

Here’s how it works: for an initial enrollment fee and a monthly charge, usually to a credit card or direct debit from a checking account, the consumer receives a card to take to his or her physician or hospital. But the doctor knows nothing about the card because he or she does not have a contract with the company.

The DMHC Help Center has received more than 1,000 calls and complaints from consumers about fraudulent discount health cards. The problem has become so bad, that the DMHC is now working on regulations to license discount health card companies that will specify significant protections to ensure that consumers are not victimized by unscrupulous operators.

Since September 2004, the DMHC has ordered 18 fraudulent discount health card companies to cease operations or become licensed. To date, the DMHC has licensed five discount health plans or products, but these new regulations will provide the framework for broad licensure of all discount health plans. In addition to licensing these plans, the DMHC will continue to aggressively shut down those who do not step forward and continue to deceive consumers.

Lower health care costs for consumers is the goal of the DMHC and the Schwarzenegger Administration and we are committed to protecting consumers from the deceptive business practices used by some discount health companies. Our proposed regulations go a long way towards accomplishing this goal.
ACC Launches New Imaging Initiative Called FOCUS

In an effort to help health care providers implement Appropriate Use Criteria (AUC) and ultimately reduce inappropriate imaging, the ACC this month is launching a new national quality improvement initiative called FOCUS (Formation of Optimal Cardiovascular Imaging Utilization Strategies). FOCUS is a quality improvement and innovation community designed to help cardiac imaging providers self-assess and gain quantitative feedback on their level of appropriate use, as well as share successes and strategies associated with AUC implementation.

Through participation in the FOCUS community, participants will have access to a shared list of tools and best practices that can then be integrated into practice. In addition, community members will have access to online educational resources and quality improvement tools and will work together with experts to understand practical ways to optimize the use of AUC in this changing payment environment. Innovation is never easy, and the ACC understands the challenges of engaging in FOCUS at a time of tremendous change. However, physician practices will benefit from FOCUS by demonstrating a dedication to professionalism, quality and resource stewardship.

For more information and to sign up for the FOCUS community, visit www.acc.org/auc. In addition, the ACC is holding a special kick-off Webinar on Jan. 19 from 2 p.m. to 3 p.m. (ET). The Webinar will provide an overview of FOCUS and the resources available. To register, click here. Questions regarding FOCUS should be directed to focus@acc.org. A FOCUS button for Chapter Web sites is also available on the Chapter Affairs Extranet.

FOCUS Quick Facts
Key Goals:
- Reduce Geographic Variation in CV Imaging
- Reduce Inappropriate Imaging by 15% by 2011
- Reduce Inappropriate Imaging by 50% in Aggregate by 2013

Professional Advantages:
- Performance Improvement Module (PIM)
- Maintenance of Certification (MOC) Credit Opportunities
- AUC Point of Order/Service Tools
- Competitive Advantage
- Opportunities to Inform Future Health Policy and Payment Reforms

NEW! Practice Survival Toolkit

The ACC has created a practice toolkit in response to the unjustified and unprecedented cuts to cardiology in the 2010 Physician Fee schedule. The toolkit includes an expansive array of information and resources on topics ranging from simple advice on collecting co-payments to options for future business plans. The toolkit aims to allow the survival of the practice of cardiology in the U.S. so that cardiovascular professionals can continue to deliver the reductions in mortality and the improved quality of life unique to the CV specialty. Click here to view the Practice Survival Toolkit.
President’s Message Here